Am Ossay Dysentery Respectfully Submitted Faculty Homosopathic Medical Colleges Tennsylvania On the first day of February One thousand Eight hundred and Fixty Six Aguila B Sippincore New Jersey

In writing upon the subject of Dysentery I am aware that I have chosen a subject that abler minds have exhauster yet think there is no disease which gives more trouble to the young practitioner both in the adult and infant patient than Dysentery, their is no disease which we are liable to confound with it, all its symptoms are characteristic and prominent. Dysentery is assentially a disease of Summer and Autumn and may be divided into two forms the acute and chronic its Causes are pumerous, the will first consider the acute form which is always characterized by there being more or less pain always present in the bowels

generally in some part of the colon which is tender on presure over the affected part; The pains are characterized by their intermittent, Shifting, and sharp Shooting pature; and is aften accompanied by a disa. greeable desire to go to Stool, get the frequent allempt to evacuate the bowels and the beolens Straining of the patient only adds to their desconfer. Their is but lettle facile matter in the discharges which are generally very small in quantity and consist of blood mixed with puss conpuscles exudations granuels and globules, and large quantitues, it containes small lumps of faeche matter, and the Stool resembles the

washings of meats or jelly like or like choped spennage or like the brafung of intestines, in its larlier Stages we generally find that it is ushered in by a chill and frequently preceded by bomiting or Dearched It is always accompanied by feever of a mild type, in ordinary coses the pulse is but little excited and the skew remains cool, In the more sence cases however we frequently find, especial, in identants Some simptoms which would lead us to expect desease of the brain such as leaving the head in the fullous frequent spasms drawing the little patient almost double, with short quick on a continual Moaning with great thirst and loss. of apetite cold sweat of face

and berry frequent descharges Somtimes amounting to Therety or Jourty in lwenty four hours, The causes are eating green fruit exposur to cold air after being heated Sleeping on the ground Malariel feeners, Dearchew purgatives, out May be induced by bathing in cold watter on a warm day. Its course is generally rapid and will terminate favourably if properly treated, but in the more severe cases it riens a much shorter course and pastens on to complete prostration and death. the most often find such cases in the frightful epidemics which Sometimes occur en our large Octies

He will now considers the chrone form, in the Diagnosis of Chronic Dysentery we find it extremely dificult to distinguish it from Chronis Diarrhed here as in the acute form we find the descharge mused with blood and the same straining and bearing down which are the charicteristics Simptoms of Dysenlery their is more feces of the flevid nature than in the acute form and for this reason it is very deficult to deslinguish from chronic Diarrher unless we can clearly perceive the presence of puss in the discharge. ther is no pain on presure and frequently we find the abdomen bloated and tempanitio the patient goes on loosing flesh and becoming very much prostrated.

The prognosis is not very favourable it prequently terminates in absorges on the liver, or the patient dies from exhausteon frequently it runs on and leaves the proteent in a Blyphoid State, Upon postmortam examination we find the mices membrane very much thickened and demided of ils epithelium and ulcerated in fact parfectly redaled with ulcers, and frequently the whole course of the intestines is to be in a State of inflamation I have endeavoured to give o clear outline of Dysentery as discribed by Many uniters which in the mained believe to be correct with the exception of the prognoses which under Homocopothic treatment claim to be much more favourable.

Treatment In the treatment of Chronic Dysentery the diet is of the greatest importance greel, arrowroot, and all other light farmaceous food Should be allowed, Sept in importance is the pygenic masures, attention to clothing and general cleanliness. and allowing the patient pure fresh air the patient should be Kept quet to facilitate a speedy cure. He will now concedider the remides most likely to be applicable to the desease Acon, Apis, As, Alum, Bell, By Gautt. Caps, Carbo br. Colch, Goloc, Mep. Spee, Merc b. Merc. S. C, Nux b. Juls, Rhus. r. Staph, Sulph. & herat. are the principal remedies.

Deonite, map When the skin is dry and burning preceased by a chill, anguish thinks he can't get well and every moovemens causes a descre to go to Stool, the abdomen is somewhat bloated with Sensitiveness to louch, Stool frequent miged with mucous and blood. Thes m brolent tenemues weth volent maseau and promiting Stool lumpy and not fetia aftermaras wattery anafetia. lastly papasens mixed with blood and murous with tenesmus and sensation as if the bowels were crushed worse in the mining Misenicum, a Tains of a burning nature great prostration dry parched skin or dry parchment like skin or blue and cold

great calaness with loss of Julse and clammy sever, sweat at the commencement of sleep drenks frequently and but little as a time constant passary and bomiting sleng green or yellowish undegested Stool especially after arenking cald watter, Stool of blood with burning and prolopsus of the rectum. Shim. when their is a constant desire to wrente but unsuccessfull except when the feces are pasing, I Welladonna. Boring the head in the pellour, raging mania dry mouth without thirst bright red tongue or only red on the borders with white middle or brown tongue. Stool mixed with mucous stool yellows witish or green

om I Argentund. w, When the Stool is greenish very fetid mucous, ulceration of the intestines with involenterry discharge of feces pain in the small of the back. Cantharides. When the Stool looks like the scrapings of intestines snixed with blood, abdomen sensitive to touck cutting and boring no the annus with constant desire to wrenate and retention of wrine, Garlo y. steeled bruised all over Syphoid State of the patient swelling and induration of the abdomen smarting in the rectum descharge acred corrosere humor from the rectum deschare of pure blood from the rectum involentery discharge of putrice cadaverous Stoal.

Colchicum. Horse from mental exertion inclination to bornet when swallowing the saliva every motion excites possiting. distention of the abdomen Dysentery with discharge of white mucous and brolent tenesmus, While lying still he feels the beating of the arteries over the whole loddy prequent borneting sometimes of greenish substances Main in the abdomen causing him to bend forward with much flatulency pain as if the bowels were squessed between two stones the bowels feel Sore the pain almost desappears during Stool but soon returns; legued frothy Stool smelling like burned paper.

Mucac. Gold sueat on hands and feet constant naseau and vomiting, bomiting large quantities of green jelly like mucous or black and puch like grass green stool or formentea patia Stool, Stool covered with bloody mucous constant pain around the ombilious. Il percurious by Stetia Smell from the mouth with Saluation coated tongue much thirss constant desire for stool without being able to accomplish any thing Stad covered with mucous and blood frothy or green stool corroding the annus burning the parts, Stool small and Sour. Mux. /b, White longue putred taste law, down in the pharmy pain in the stomoch

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as that of a Stone burning in the pit of the stomach, choice succeeded by dark colored forces causing burnings in the annus small stool mostly, of Mucaus discharge of blood with Sensation of construction of the annus. Mhus. t. Dry red or bours tongue, red and yellows stool mired with mucous especialy suitable in Cyphoid condition involentery stool. The pratient worse while lying down at night. He find many other very importans remedies such as, Alaes. Trombidium, m. d. It becomes the duty of the Physician to select the remedies according to the characteristic simploms present